

# APPLICATION FOR INFORMAL HEARING

## COMPLETE AND RETURN TO

NEW JERSEY DEPARTMENT OF LABOR  
DIVISION OF WORKERS' COMPENSATION  
PO BOX 381  
TRENTON, NEW JERSEY 08625-0381

PLEASE PRINT  
OR TYPE

Social Security No.

(Must be 9 Digits)

Employee \_\_\_\_\_ Phone No. \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Insurance Company \_\_\_\_\_ Date of Accident \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of the Insurance Company can be obtained either from the Employer or by writing to the  
Compensation Rating and Inspection Bureau  
60 Park Place, Newark, New Jersey 07102  
(BE SURE TO INCLUDE SELF-ADDRESSED STAMPED ENVELOPE)

Type of Injury \_\_\_\_\_

Hearing Requested by \_\_\_\_\_

### COMPLETE ONE:

NEW JERSEY EMPLOYER

REGISTRATION NUMBER \_\_\_\_\_

OR FEDERAL EMPLOYER

IDENTIFICATION NUMBER \_\_\_\_\_

WERE YOU ELIGIBLE FOR MEDICAID BENEFITS AT THE TIME OF THE ACCIDENT? ☐ YES ☐ NO

DID YOU BECOME ELIGIBLE FOR MEDICAID BENEFITS AFTER THE ACCIDENT? ☐ YES ☐ NO

YOU ARE ADVISED THAT MEDICAID PAYMENTS RELATED TO THE ACCIDENT ARE TO BE REPAID IN ACCORDANCE  
WITH N.J.S.A. 30:40-1, et seq.

**IMPORTANT:** "This proceeding will not prevent the Statute of Limitations from expiring  
FAILURE TO FILE A FORMAL PETITION within two years of the date of accident  
or the last payment and/or authorized medical treatment by the employer's  
insurance carrier, can bar any action on a claim filed after that time."

**TO INSURE IMMEDIATE PROCESSING,  
PLEASE COMPLETE THIS FORM IN FULL OR IT WILL BE RETURNED**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The Privacy Act, 5 U.S.C. § 552a, the Social Security Act, 42 U.S.C. § 405, and N.J.S.A. 34:15-1 et seq. authorize the Division of Workers' Compensation to request that the Petitioner supply the Division with his or her Social Security number for record keeping purposes and cross-matches with the Social Security Administration, Workforce New Jersey, Temporary Disability Insurance and any other proper public purpose.